

# **EXHIBIT “L”**

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**Statutory Claim Requirements**

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### Response to Notice of a Claim

On first party losses (policy benefits sought by an insured), within 30 days the insured must be advised in writing, or by dated notation in the file, what is needed to present their claim and what constitutes a satisfactory proof of loss. If the claim is resolved within 30 days the file should be self-explanatory.

On other losses, response to communication by the claimant about what is needed to present their claim and prove their loss should also occur within 30 days. If the claim is resolved within 30 days the file should be self-explanatory.

Initiating investigation into the circumstances surrounding the report and the event that led to the claim are not subject to control by people outside the Company. We should conduct appropriate investigation into reports, first determining whether or not coverage existed, and then how the coverage applies to the specific situation.

A report to an agent is a report to the Company, and claims should be acknowledged within ten days, either in writing or by dated notation in the file.

### Response to Correspondence

The file must reflect, either in writing or by dated notation in the file that any correspondence has been answered within 15 days of receipt.

### Payment of Claims

Confidential  
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